PTO/SB/06 (07-06)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Filing Date 10/582.957 02/21/2007 To be Mailed Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY | SMALL ENTITY (Column 1) (Column 2) OP FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) □ BASIC FEE N/A N/A NI/A N/A SEARCH FEE N/A N/A N/A N/A EXAMINATION FFF NI/A NI/A NI/A NI/A (37 CFR 1.16(a), (p), or (q TOTAL CLAIMS OR minus 20 = X \$ X \$ INDEPENDENT CLAIMS × 5 = × s minus 3 = If the specification and drawings exceed 100 sheets of paper, the application size fee due PAPPLICATION SIZE FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL ΤΩΤΑΙ APPLICATION AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDITIONAL ADDITIONAL 01/28/2010 RATE (\$) RATE (\$) AFTER PREVIOUSLY EXTRA FEE (\$) FEE (\$) MENDMENT AMENDMENT PAID FOR Total (37 CFR 34 Minus **-- 38** = 0 Y 6 OR X S52= ٠ 4 Minus ···48 = 0 x s OR X \$220= n = Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR n ADD'L OR ADD'L FFF (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT ADDITIONAL ADDITIONAL REMAINING NUMBER RATE (\$) RATE (\$) AFTER PREVIOUSLY FXTRA FFF (\$) FEE (\$) AMENDMENT PAID FOR ENDMEN Total (37 CFF Minus X \$ = OR X s Minus *** OR X S = X S Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) TOTAL TOTAL ADD'L OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". /LAMONT MCLAUCHLIN/ *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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